

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND  
CAMPAIGN DISCLOSURE

2010 MAY 17 PM 2:09

COMMITTEE NAME (Must be same as on Statement of Organization)

SWAIM FOR HOUSE

IMPORTANT: Indicate by # type of committee you are reporting for: 1

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Kurt Swaim

Political Party (if applicable)

Democrat

Office Sought

State House District 94

District (If Senate or House)

94

<b>FORM DR-2</b> (Rev. 12/2009)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1357
Logged In	
Scanned	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A May 19, 2010

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

(3,108.20)

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

11,693.75

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

4,737.24

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (If final report balance must be zero)

3,848.31

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

0

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

6,882.44

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)****SWAIM FOR HOUSE**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/4/2010	ID# 9688 CK# 1020	Iowa Landlord PAC 6000 Douglas Ave., Ste 208 Des Moines, Iowa 50322		\$ 250.00	<input type="checkbox"/>
1/9/2010	ID# 6082 CK# 1518	MidAmerican Energy Co. Effective Government Committee#6082 666 Grand Ave. Des Moines, Iowa 50303		200.00	<input type="checkbox"/>
2/2/2010	ID# CK#	Attorney Client Trust Account check made payable to Success Bank/Restitution check from attorney trust account of Robert Box, attorney for my former campaign treasurer			<input type="checkbox"/>
	ID# CK#	made payable to Success Bank to close out that campaign account.		3,411.80	<input type="checkbox"/>
2/2/2010	ID# CK#	Attorney Client Trust Account check made payable to Swaim For House/Restitution check from attorney trust account of Robert Box, attorney for my former campaign			<input type="checkbox"/>
	ID# CK#	treasurer, made payable to Swaim For House for balance of restitution owed Swaim For House by former campaign treasurer, Kristie Ryden		6,786.46	<input type="checkbox"/>
3/17/2010	ID# CK#	Evalyn I. Johnson 404 E. Locust Street Bloomfield, IA 52537		25.00	<input type="checkbox"/>
3/29/2010	ID# CK#	Lynch Realty 103 E. Franklin St. Bloomfield, IA 52537/ Return of security deposit fir storage shed		20.00	<input type="checkbox"/>
4/30/2010	ID# CK#	Community First Bank Bloomfield, IA 52537 (Interest)		.49	<input type="checkbox"/>
5/14/2010	ID# 6070 CK# 3939	Iowa Law Pac 625 East Court Ave. Des Moines, IA 50309		1,000.00	<input type="checkbox"/>
SUB-TOTAL				\$ 11,693.75	
TOTAL (if last page of this schedule)				\$ 11,693.75	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)**SWAIM FOR HOUSE**

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/4/2010	ID# * CK#	Bank Charge	Overdraft Fee	\$ 15.00
1/5/2010	ID# * CK#	Bank Charge	Overdraft Fee	30.00
1/22/2010	ID# CK# 1013	Carter Printing	Printing	37.21
2/12/2010	ID# CK# 1014	Iowa Democratic Party	VAN	1,000.00
2/23/2010	ID# CK# 1015	Davis Co. Fair	Ad in Fair Book	50.00
2/28/2010	ID# CK#	Community First Bank	Regular Acct/Service Charge & Sales Tax/New Account	.88
3/19/2010	ID# CK# 1016	Iowa Democratic Party House Truman Fund	Retirement Dinner	50.00
5/13/2010	ID# CK# 1017	House Democrats/ Truman Fund	Donation	3,000.00

\* I was not alerted to any overdrafts to my campaign account until I received the call from the bank on January 5, 2010. Prior to that date I was not informed of any overdraft charges to my campaign account.

SUB-TOTAL \$ 4,183.09  
TOTAL (if last page of this schedule) \$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

SWAIM FOR HOUSE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/13/2010	ID# CK# 1018	Kurt Swaim	Reimbursement formileage 1091.1 miles	\$ 545.55
	ID# CK#	Restitution reconcilia- tion adjustment		8.60
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 554.15
TOTAL (If last page of this schedule)				\$ 4,737.24

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

SWAIM FOR HOUSE

<b>SCHEDULE E</b> (Rev. 06/97)	<b>IN-KIND CONTRIBUTIONS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
2/10/10	Iowa Democratic Party House Truman Fund 5661 Fleur Drive Des Moines, IA 50321		Mail Piece #1	\$ 1,781.75	<input type="checkbox"/>
2/26/10	Iowa Democratic Party House Truman Fund 5661 Fleur Drive Des Moines, IA 50321		Mail Piece #2	1,700.23	<input type="checkbox"/>
3/15/10	Iowa Democratic Party House Truman Fund 5661 Fleur Drive Des Moines, IA 50321		Mail Piece #3	1,700.23	<input type="checkbox"/>
5/6/10	Iowa Democratic Party House Truman Fund 5661 Fleur Drive Des Moines, IA 50321		Mail Piece #4	1,700.23	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 6,882.44	
TOTAL (If last page of this schedule)				\$ 6,882.44	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)